

EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL
December 11, 2002

Members/Alternates Present: Ms. Barbara Aras, Mr. Jesus Cepero, Mr. Robert Dinetz, Ms. Karen Halupke, Mr. Martin Hogan, Dr. Steven Marcus, Mr. Richard Matzer, Mr. Mickey McCabe, Ms. Debbie Murante, Dr. James Pruden, Mr. Craig Reiner, Mr. Robert Resetar, Mr. Fred Steinkopf, Dr. Jennifer Waxler, Ms. Susan Way, Ms. Paula Weiler, Mr. Phil Wien

Members/Alternates Absent: Ms. Terry Clancy, Senator Palaia, Mr. Ron Czajkowski, Mr. James Davidson, Mr. Robert Hansson, Dr. David Livingston, Mr. Donald Murray, Mr. Roberto Rodriguez, Ms. Deborah Timpson

DHHS Staff Present: Mr. William Dougan, Mr. William Duffy, Ms. Nancy Kelly-Goodstein, Mr. Chuck McSweeney, Mr. Don Roberts, Ms. Linda Taglairino

Dr. James Pruden called the meeting to order at 10:20 a.m.

Minutes from September 18, 2002 meeting were approved.
Motion to accept. Seconded. All in favor.

GOALS FOR THE FUTURE

Dr. Pruden asked each Council member to give goals and visions for the future.

Mr. Dinetz – Work towards improving education, training and development of our cadre of instructors (primary emergency medical technician (EMT) level, secondary advanced life support (ALS) level). Participate and help carry forth, new innovative programs (e.g., geriatrics for emergency medical services (EMS), enhance continuing education of EMTs and Paramedics).

Ms. Caputo – Providing viability to the ALS system.

Mr. Cepero – Emergency Nurses Association’s support of the EMS Council. Standardizing terminology statewide for hospital diversion and by-pass.

Ms. Murante – Publicity and marketing so we are recognized as a part of emergency services. General public should know what the EMT Training Fund Council does and its importance.

Mr. Resetar – Communication of accurate and timely data from every 9-1-1 provider to a central point. Simplify and expedite the mechanism to make changes in EMS.

Mr. Reiner – Uniform instruction for the EMS dispatch course.

Ms. Aras – Find viability to maintain the volunteer system. Medical treatment issues should be protocols and not regulations, as regulations take too long to change.

Mr. Steinkopf – Corporate goal is the revitalization of the volunteer community through recruitment and retention. Personal goal would be to move towards a peer licensure system similar to other professional boards.

Dr. Marcus – Focus on the continuum of care not just the prehospital system. Spend time on medical issues as well as trauma and cardiac care.

Ms. Weiler – Recruitment of new volunteers and retention of existing trained personnel.

Mr. Wein – Retention and recruitment of personnel and squads. Promote communication from the Council to every EMS provider.

Mr. McCabe – The EMS Council needs to be recognized by the Commissioner as the clearinghouse for EMS issues through the state. Need to review the system for strengths and weaknesses.

Ms. Way for Commissioner Lacy - Look at the EMS system through a standardized mechanism (i.e., National Highway Traffic Safety Act) and try to improve the delivery of quality patient care to the citizens of New Jersey.

Dr. Pruden – Create a quality data system. Return to a patient focus oriented system.

Dr. Waxler – Working together for a safer community. Help design a cost effective system with quality patient care as the focus.

Ms. Kelly-Goodstein – Identify an effective way to conduct injury prevention.

Ms. Halupke for Ms Way – Allocate appropriate resources to OEMS to do more for public education, new program development, educational programs, and the annual

conference. Create a statewide prehospital patient care report. Put the “medical” back in EMS instead of the usual reference to emergency service workers.

Dr. Pruden stated that through the efforts of Dr. Stuart Weiss and Dr. Jen Waxler, a meeting was conducted with Commissioner Lacy. A group of physicians involved in EMS attended, and gave the Commissioner an update as to what is happening with EMS from a physician’s perspective. The Commissioner suggested the creation of a Blue Ribbon Panel to look at EMS and design a patient focus, rational, efficient, quality driven system for the provision of prehospital care in the State of New Jersey. Dr. Lacy charged the EMS Council with establishing such a commission, and generating a report by June of 2003.

BASIC LIFE SUPPORT (BLS) COMMITTEE

No meeting. No Report.

BY-LAWS

Recommend approving the bylaws as written (see attached copy).

Motion to approve. All in favor. Motion carried.

EMS COMMUNICATIONS COMMITTEE

Committee Members Bob Resetar, Lou Sasso, and Frank Goodstein represented EMS Communications at the Federal Public Safety Wireless Network (PSWN) conference held in Trenton. The conference was sponsored by PSWN; New Jersey Attorney General’s Office, Terrorism Task Force; and the League of Municipalities. The purpose of the program was to heighten awareness of public officials across the state about the need to have communication interoperability among all public safety officials. At the conference, Mr. Resetar asked that any legislation designed to create a Wireless Coordination Group must include EMS representation. Currently, the Assembly Bill 1971 proposes the group’s creation but EMS representation is missing. To that end, the Communications Committee asked that the EMS Council send a letter to the Attorney General’s Office (Mr. Thomas O’Reilly, Administrator) requesting that the legislation be amended to include EMS representation and that the EMS Council recommend that the EMS Communications Chair fill that position. The New Jersey Association of Paramedic Programs has also been asked to send a letter on this issue.

Office of Emergency Telecommunication Services conducted regional meetings with Public Safety Answering Points about the new E-911 network being worked on.

National Emergency Number Association (NENA) conference is in April 2003.

Emergency Medical Dispatch Guide Card Committee has been restructured. Unfortunately, the report that was scheduled for this meeting has been delayed due to questions concerning the CPR card. Once the issue of which standards to use is resolved, the cards will be completed and forwarded for approvals. The committee apologizes for the delay.

Trunked radio system update:

Trauma Centers; All the radios at the ten trauma centers and the Burn Center at Saint Barnabas are operational.

MICU Statewide radio network; Advanced Life Support Communication Centers operational include - REMCS, HUDCEN, MICCOM, CENCOM, MEDCENTRAL, MONOC, Somerset County, LIFECON, MEDCOM-Voorhees, the radio has been ordered for Community Medical Center MEDCOM.

The Hospital emergency radio network is under construction. 26 radios are installed though not all are in an operational mode for a variety of reasons. These radios will have an alert capability that will allow activation of all or any part of a given region simultaneously.

Motion to accept. Seconded. All in favor.

Discussion:

The National Disaster Medical System will be conducting an ongoing trial/test collection of daily hospital bed status. Many communication centers participated, with the schedule to be amended to a biweekly status.

Motion to accept. Seconded.

Mr. Resetar made a motion that a letter be sent by the EMS Council requesting that EMS be added to the list of representatives on the wireless council as outlined in Assembly Bill 1971. Mr. Resetar requested that the EMS representative be the chairperson of the Communications Committee that serves on the EMS Council. Given that the EMS Council is an advisory body to Commissioner Lacy, a letter will be sent to Commissioner Lacy. Assemblywoman Heck is the sponsor of this legislation.

Motion to accept. Seconded. All in favor.

EMERGENCY MEDICAL TECHNICIAN (EMT) TRAINING FUND

Ms. Murante reported that there was better attendance at their last meeting, with a great deal of work accomplished. Credit was given to Mr. Robert Dinetz and Ms. Susan Way

for facilitating a number of issues. The mechanism to distribute the computers to volunteer first aid squads was discussed. Amended bylaws were approved, clarifying the quorum. The Council also approved funding for two initiatives: NJ State First Aid Council Annual Convention educational seminars and monies for the DHSS to conduct a seminar for updating and educating EMT instructors.

Motion to accept. Seconded. All in favor.

Discussion:

Ms. Way added that monies were also approved for making a video: "What is the EMS system."

All in favor.

MICU ADVISORY COUNCIL

Dr. Pruden reported on the meeting with the Commissioner and future planning. One issue raised at the MICU meeting was the ability of advanced life support providers to perform rapid sequence intubation. The MICU Advisory Council received a letter of opposition to this skill from the Trauma Council. A meeting was held with representatives of the trauma centers, and many of their concerns regarding this procedure were addressed. A change was made in the adult standing orders for chest pain, to allow the administration of Nitroglycerin prior to the establishment of an intravenous line. Also discussed was the use of standing orders and need for on-line physician medical control. The JemSTAR system purchased a new helicopter (as backup, bring the number of ships to four). The next initiative will be to replace the existing helicopters. A proposal was presented regarding how paramedics were to function in a mass casualty incident (MCI), and what waivers to the regulations would be necessary in an MCI. Commissioner Lacy gave a short presentation about smallpox as a weapon of mass destruction.

Motion to accept. Seconded. All in favor.

NJPIES

Dr. Marcus reported on the shortage of vital medications due in part to a federal initiative to create a national pharmaceutical stockpile. This shortage is going to impact on prehospital ALS, emergency departments and quality patient care. Recently, a cyanide kit was utilized at a hospital and a replacement for the kit cannot be secured. Dr. Marcus requested that the EMS Council forward a letter to the Commissioner stating our concern that this national shortage will impact on our ability to care for patients.

Dr. Marcus reported that NJPIES continues to respond to about 300 telephone calls per day. NJPIES continues to be involved in national efforts in poison prevention.

Educational efforts are currently aimed at elementary age school children with a newsletter to first graders and an in-school program for second graders. The three educators are scheduled for programs several months in advance.

NJPIES has been trying to work with the state pharmacy board and the JCAHO about the use of expired antidotes. In New Jersey, the DHSS licenses all of the acute care hospitals and carries out inspections. The presence of out-of-date medications results in citations to hospitals. Dr. Marcus has spoken to Commissioner Lacy concerning the shortage of antidotes and potential need for hospitals to store outdated antidotes. The Department of Defense has been stockpiling some antidotes and reducing their availability to hospitals (e.g., cyanide kit, 2-PAM, snake anti-venom). There appears to be a misconception that preparedness for a nerve gas attack includes securing massive amounts of atropine. This was not the case in the Tokyo sarin gas experience. A patient with organophosphate insecticide overdose is treated with a large quantity of atropine. There is serious question about the efficacy of 2-PAM, but that medication did not appear to be used in great quantities in the Tokyo incident.

NJPIES is in the late planning stages for Poison Prevention Week in March 2003. Governor McGreevey's wife has promised to participate in this initiative.

Motion to accept. Seconded. All in favor.

Discussion:

The question was raised as to what specific antidotes are unavailable? Dr. Marcus responded that virtually everything is in short supply, but in particular are the medications identified for the national pharmaceutical stockpile. Medical expiration dates are artificial, with the drugs maintaining their efficacy beyond the stated expiration date. Dr. Pruden added that there are an incredible number of medicines that are no longer being made by the companies for a variety of reasons.

All in favor.

Dr. Marcus proposed that a letter be sent by the EMS Council requesting the Department look into actions to guarantee the existence of essential medications/antidotes for both prehospital ALS and emergency rooms. Also, to amend the enforcement actions taken by the Department against hospitals for maintaining a supply of outdated medications, due to their inability to replenish certain medications.

Motion to accept. Seconded. All in favor.

NJOEM

Mr. Hansson was not present. No report.

NEW JERSEY STATE FIRST AID COUNCIL (NJSFAC)

Mr. Steinkopf stated that two weekend continuing education seminars are to be conducted in the first six months of 2003 (Incident Command on April 26 & 27 is free to all volunteer EMTs, others to pay a fee; and a legal series on a variety of topics by Wolff and Worthberg, tentatively scheduled for early June). As a result of a meeting between representatives of the NJSFAC and OEMS staff, the NJSFAC will withdraw their request for approval of their crossover program for first responders to EMT. OEMS has committed to work with NJSFAC to develop a crossover course based upon national model programs. The 2003 NJSFAC Officers are Fred Steinkopf, President; Barbara Aras, Central Area Vice President; Sue VanOrden as Northern Area Vice President; and Dick Bailey as Southern Area Vice President. Phil Wein will be Dick Bailey's alternate.

Motion to accept. Seconded. All in favor.

Discussion:

Dr. Pruden commended OEMS and NJSFAC for coming up with a plan to handle the crossover situation.

Motion to accept. Seconded. All in favor.

EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC)

Ms. Kelly-Goodstein reported for Dr. Leva.

2003 Meeting Dates/Location

- Tuesday, February 25
- Tuesday, May 13
- Tuesday, September 16
- Tuesday, November 18
 - 10:00 am – 12:00 pm
 - NJ Hospital Association, 760 Alexander Road, Princeton

At the last meeting (November 19, 2002) the following items were discussed:

- 2003 Conference – tentatively scheduled for May 18 – May 19
- A committee was established to address the pediatric component of the Epi-Pen administration by EMTs.
- Fall/Winter EMSC Newsletter to be mailed with the next few weeks.

- Two meetings were conducted with hospital emergency department staff regarding pediatric-related regulations and the roles of the liaison physician/nurses.
- There is an interest in creating a new organization/society for pediatric emergency medicine physicians.
- An application was filed in November for a new three-year partnership grant (03/03-02/06). We will not know if this money is available until February 2003.
- A pediatrician office preparedness program is available (conducted on-site, review of available equipment, staff to manage scenarios) – if interested contact Dr. Leva at (732) 235-7893.
- Six regional in-services were conducted for school nurses (673 total attendees) on START, Emergency Management and EMS.
- A committee was established to create a recommended minimum equipment list for schools.
- NJ is a participant in the Mid-Atlantic EMSC Regional Group, with a focus on:
 - Sharing projects developed.
 - Networking.
 - Annual meeting – Spring 2003 (anyone interested, please contact Nancy)

Motion to accept. Seconded. All in favor.

Discussion:

The Department of Education requires school nurses to maintain current CPR certification. School nurses should be encouraged to be part of the school committee that develops the disaster plan for their facility. We are working to expand the EMSC Advisory Council to include a representative from the NJ State School Nurses Association. At each of the seminars, Ms. Kelly-Goodstein reminded the nurses that they can complete the EMTB Core program, become more familiar with the hands-on skills and become certified as EMTBs. Mr. Hogan stated the Department previously offered a crossover RN-EMT course. Most schools don't have emergency medical equipment. Dr. Marcus suggested that Commissioner Lacy send a letter to the Department of Education, encouraging the involvement of school nurses in the preparedness process. Mr. Resetar stated that preparing for natural disasters need to be addressed with the schools. Dr. Pruden stated that one of the preparedness goals is better drilling and coordination with all facets of the out of hospital community, and that there is a need to have disaster drills with police departments, fire department, EMS and schools.

Motion to accept report. Seconded. All in favor.

Ms. Aras stated that most issues are taken to the local school board for resolution. Ms. Aras offered the resources of the NJSFAC to support the school preparedness effort. Dr. Pruden requested that the EMSC program develop a fact sheet as to the school preparedness issues and potential remedies.

TRAUMA CENTER

Dr. Livingston not present. No report.

LEGISLATIVE

Mr. Hogan thanked Ms. Sue Caputo for doing a phenomenal job with the legislative issues. Due to a change in responsibilities, Ms. Caputo will be stepping down from her role in the legislative position.

Ms. Caputo stated that the following towns support Assembly Bill 1971: Lodi, Newark, Clifton, Somerset, New Brunswick, Parlin, Midlin Park, and Freehold.

Senate Bill 1227/Assembly Bill 1775 concerning "Fire Services Resources Emergency Employment Act" all references to "ambulance" have been removed.

Assembly Bill 667/Senate Bill 341 concerning "Certification of EMTs to administer Epi-pens" would require the promulgation of regulations by the Department. A request was made to the MICU Advisory Council to have medical protocols replace regulations. The bill was approved by the Assembly, and is now back to the Senate.

Assembly Bill 403 driving emergency vehicles would permit vehicles to go through stop signs and disregard traffic regulations. Because it was reported favorably, it went to the Homeland Security State Preparedness Committee. This bill allows people to violate traffic laws. The bill is trying to address a narrow focus, keeping the police officer from giving a traffic ticket if an accident occurs.

Assembly Bill 1843/Senate Bill 123 would require an Impact statement for any proposed regulations affecting volunteer ambulance squads and fire companies. This Council has already written two letters of support of the proposed legislation.

Motion to accept. Seconded. All in favor.

Discussion:

Dr. Pruden commended the members of the NJSFAC who have participated in the legislative review and monitoring. Also, he thanked Ms. Caputo for being very effective, diligent, and thorough in providing to us an understanding of what is going on.

Motion to accept. Seconded. All in favor.

OPERATIONS

Mr. McCabe looked into the EMT immunity legislation. Legislative Services will be looking into this issue.

The security task force has completed its work, and it is time to move forward with their recommendations. These items include:

ITEM 1: Individual ID Cards

- All NJ EMS personnel be issued standard identification cards authorized by the NJ Office of Emergency Management (NJOEM).
- The ID will be a standard laminated tag with three mechanisms for instant identification:
 - A magnetic data strip and readable bar code to be scanned on scene at MCI prestaging areas. In order to facilitate this screening process, it is requested that at least 126 hand held bar code readers be purchased.
 - Printed information on the card will include the provider's name, date of birth, provider type, provider expiration date, agency represented and an EMS identifying provider number.
 - A photo of the provider.
- The ID cards will be issued in the following fashion:
 - EMT-Bs and First Responders representing squads that do not bill their patients will be issued IDs by the New Jersey State First Aid Council (NJSFAC).
 - EMT-Bs representing non-aligned squads that do not bill will be issued IDs by the Office of Emergency Medical Services (OEMS).
 - EMT-Bs representing squads that bill their patients will be issued IDs by the OEMS.
 - Licensed EMS providers will be issued IDs by the OEMS.
 - All other EMS providers, e.g., paramedics, mobile intensive care nurses (MICN), and physicians, will be issued IDs by the OEMS.
- The database of currently certified EMS providers will be furnished by the NJ Department of Health and Senior Services/Office of Emergency Medical Services, the official certifying agent.
 - IDs will be issued on different color stock papers in order to visually differentiate the type of provider, e.g., red stock for First Responders, green stock for EMTs, pink stock for EMTs under the age of 18 years, yellow stock for paramedics and MICNs, white stock for physicians, etc.
 - Photo IDs: EMT-Bs over 18 years of age will be photographed full face as opposed to those under the age of 18 who will be photographed in a profile view, similar to the policy of the NJ Department of Motor Vehicles.

ITEM 2: EMS Vehicle Identification

- In order to enter the EMS staging area, all EMS vehicles—ambulances, rescue trucks, chiefs' cars, etc. will also need OEM identification decals that will be immediately and easily visible to security personnel.

- Said identification would be a special OEM decal issued by the NJSFAC or OEMS, and applied either:
 - Above the vehicle's NJ DMV inspection sticker on the front windshield (OEMS licensed provider vehicles).
 - Or, if there is no DMV sticker, to be applied to the lower corner of the driver's side windshield (NJSFAC member squad vehicles).
 - All EMS provider vehicles must have an OEM ID in order to enter an EMS staging area. Non-aligned first aid squads will be eligible for vehicle IDs following an inspection by either the NJSFAC or the OEMS. This inspection will attest to all equipment standards being adhered to.
- These decals will be color coded for immediate recognition and appropriate placement in the staging area, (e.g., BLS, ALS, communications vehicles, etc.).
- The decal is non-transferable. If the EMS vehicle is sold or transferred, the decal must be removed.

ITEM 3: Pre-staging Area Personnel

- An adequate number of qualified persons should be assigned to staging areas based on the size of the operation. Prior to being allowed into the staging area, this security team will identify EMS personnel tags and vehicle identification decals and clear them to stage at a specified area. Vehicles without appropriate decals will be denied access to the staging area and will be subject to impound, if deemed suspicious.

ITEM 4: Attorney General Acceptance of Pre-staging Area

- It is recommended that the NJ EMS Council forward a letter to the NJ Attorney General's Office requesting a Heightened EMS Security Directive which will state:
 - At the time of a multi-casualty incident, local police authorities will work in concert with the local EMS command to provide surveillance of EMS vehicles and personnel prior to EMS staging.
 - The purpose of this directive is to guarantee trained law enforcement presence at EMS staging areas to discern any possible threat to EMS security and well-being.
- We further respectfully request that this EMS identification program be adopted as part of NJ's Homeland Security Program and that all costs incurred be borne by the state. It is further requested that the Attorney General's Office sanction the EMS personnel ID and the EMS vehicle decal.

Motion to accept. Seconded. All in favor.

Discussion:

Plan needs to be implemented, funded, and put into a form of legislation so funding can be appropriated. Ms. Joan Quigley, Chairwoman of the Assembly Homeland Security Task Force has already agreed to sponsor this legislation. The estimated cost is

approximately \$500,000. MICNs to receive the same color card as MICPs. Mr. Hogan suggested requesting six scanners per county. Mr. Steinkopf stated the unique ID number will not be a social security number.

Dr. Pruden stated that we, as an EMS Council, need to be able to help in the identification process of these kinds of incidents. This is a product of the EMS Council and a suggestion to the Commissioner of how that issue can be addressed. The idea is to move forward with a reasonable product so that the process can be started. Mr. McCabe stated the purpose and intent of this document is to secure the safety of the staging area of EMS personnel. A report must be given if a decal is missing. Mr. McCabe thanked the committee for working very hard on this project.

Motion to accept. Seconded. All in favor.

PROFESSIONAL EDUCATION

Mr. Dinetz reported:

Geriatrics for EMS

- Beta Pilot courses for BLS/ALS conducted this past weekend at RWJUH in New Brunswick.
- Cooperative effort between:
 - National Council of State Emergency Medical Services Training Coordinators
 - American Geriatrics Society
 - Jones & Bartlett
- Courses consist of lecture, hands-on skill scenarios and small group activities that focus on the response, communications, care and other related issues facing the EMS provider who responds to the geriatric patient.
- Formal rollouts will begin in the spring of 2003 and OEMS in cooperation with these other organizations will sponsor one of these rollouts.

Instructor Development Symposium

- OEMS in cooperation with the Atlantic EMS Council will sponsor a statewide Instructor Development symposium in the spring of 2004. The primary target population will be our cadre of EMT instructors.
- Funding to support this initiative will come from the EMT Training Fund. Members of the Council, in attendance at the December 4 meeting, wholeheartedly support this initiative.
- More information will follow as plans move forward on this project.

EMT Instructor Training Institute

- Annual EMT Instructor Screenings will be held at 8 a.m. on:
 - January 19 – Camden County College

- January 25 – Essex County Police Academy
- February 1 – Toms River East High School
- February 8 – Same location in case of a snow cancellation
- Deadline for submission of eligible candidates by all EMT course site sponsors/coordinators is December 15.
- Candidates will be scheduled on a first come – first served basis. Each candidate is given three choices for screening location. Those who sign up early get to go to the location of their choice. Late arrivals have no guarantees. We try to accommodate everyone.

Course Dates, Times, Location

- This year's instructor course will be held at the Toms River East High School on March 1, 2, and 8, 2003. All sessions will begin at 8 a.m. sharp.

Motion to accept. Seconded. All in favor.

Discussion:

The overall pass rate for EMT-B statewide has gone up ten points. Some training sites have gone up higher (high 70s to low 80s). A lot of sites have not seen a significant improvement. These sites are being targeted for instructor enhancement.

Motion to accept. Seconded. All in favor.

PUBLIC EDUCATION

Dr. Waxler stated the brochure the EMS Council developed on "What is EMS?" is finished. The committee is now looking for suggestions as to where this brochure can be utilized. One suggestion is to translate it into Spanish. Next brochures will be on basic life support (BLS) and advanced life support (ALS).

The committee is looking at linking some of the related websites.

The committee will look to working with EMSC and school nurses.

Motion to accept. Seconded. All in favor.

Discussion:

Suggested to put the brochure on the state website. Mr. Resetar suggested it be sent to every newspaper. Mr. Steinkopf stated they will have a table at EMS Today in Philadelphia and they can put them on their table.

Motion to accept. Seconded. All in favor.

SYSTEM FINANCE

Mr. McCabe reported that there are isolated problems, with several complaints received. Any council member representing an agency that bill for service is encouraged to check with their finance departments. Medicaid managed care is out of control as far as emergencies are concerned. No fault rate has not increased in ten years. Workmen's compensation carriers do not appear to be aware of what EMS does. This may be an issue in 2003.

OFFICE OF EMERGENCY MEDICAL SERVICES (OEMS)

Received approval from the Commissioner for the waiver of the Standing Orders in favor of the one being posted in regulations. MICU programs are aware of the waiver and have begun implementing the changes. Ms. Way commended the MICU advisory board for that idea.

Dr. Stewart Weiss joined DHSS staff heading up bioterrorism area along with Mr. Kevin Hayden. Mr. Jim Baca (education section) and Mr. Don Roberts (emergency care monitoring) have recently joined the EMS staff.

The fourth helicopter was purchased for the JemSTAR program. It is a refurbished helicopter, and the New Jersey State Police are proceeding with the replacement plan for the remaining ships (Sikorsky).

The smallpox immunization plan is in progress.

Motion to accept. Seconded. All in favor.

Discussion:

Mr. Steinkopf thought that it looks like NYC is going to administer the first round of smallpox immunizations to the prehospital EMS providers instead of the police and fire. Although each state is implementing their own plan, EMS personnel are not scheduled for the first phase of the immunization plan as the federal plan does not recommend first responders in first wave of inoculation. Dr. Marcus commented that the CDC is suggesting to process contaminated laundry with water heated to 160 degrees. This is a dangerous practice because the water could scald you. Mr. Sasso stated the plan is on the CDC website. Ms. Halupke stated each hospital has to make a determination as to whom they will vaccinate in the first wave. An individual hospital could decide to vaccinate EMS personnel if they chose. After an exposure, there is a three-day window, during which, if you are vaccinated, you are probably protected from getting the disease. If vaccinated within seven days, post exposure, there is a likely that the severity of the disease will be decreased. OEMS has not seen the plan. Dr. Pruden

stated the best practice to follow would be to use universal precautions, and read the information on the CDC website.

Motion to accept. Seconded. All in favor.

STATEWIDE RADIO SYSTEM PRESENTATION

Mr. Resetar said the Hospital Emergency Radio Network is being created on the statewide state police trunk system. All 84 hospitals will obtain radios. There are three parts, a transmitter and two remotes (one for the emergency department and the other for a disaster emergency command center). The radio is set up with tone alerting capabilities (e.g., 9-1-1 alert, regional dispatch centers, bed status activation). There are three communication centers identified to be the coordinating centers for the radios. They are MedCentral at RWJUH, REMCS in Newark, and MEDCOM-Voorhees. All hospitals should be online by the end of January. New Jersey has taken the lead in establishing this type of statewide radio communications.

ELECTIONS

Dr. Waxler made a motion to reelect Dr. Pruden as the President of the EMS Advisory Council.

VOTE – All in favor.

Election of Executive Committee members to join Dr. Pruden (Chair) and Dr. Waxler (Vice Chair):

- Bob Resetar
- Fred Steinkopf
- Mickey McCabe

OTHER BUSINESS

Dr. Pruden reported on the establishment of a 15-member Blue Ribbon Panel that the Commissioner charged the EMS Council to form to develop recommendations to modify the EMS system in New Jersey. The Commissioner is looking for a final report within the next six months. This is an opportunity to look at redesigning a better EMS system in New Jersey. The federal negotiated rulemaking is causing a problem in many areas. Each member of the EMS Council is to submit a list to Dr. Pruden of core organizations that need to be included, and the Executive Committee will develop the Blue Ribbon Panel.

Motion to accept. Seconded. All in favor.

PUBLIC COMMENT

Mr. Jacob Hafta introduced himself as a paramedic/attorney. His firm does EMS system design and consulting, working with municipalities and organizations to try to redesign systems within requirements of the law because they are failing.

Mr. Dick Bailey asked if we want to go back to the old two-tier system. Federal budget surpluses should be redirected to fund EMS. Mr. Bailey suggested taking this problem to the President of the United States.

Mr. Don Roberts from the Office of EMS announced that EMS Week Nominations for 2003 are now being accepted. A search has been conducted for a site to host the Sunday, May 18, 2003 EMS Awards Dinner. Bob Dinetz stated we only can be as successful as the participation of the community, and encouraged more award nominations.

Phil Wein stated it was a pleasure to serve on the EMS Council and he looks forward to being an alternate next year.

CLOSING

Dr. Pruden thanked Mr. Wein for his service on the EMS Council. Dr. Pruden recognized Allentown First Aid Squad for hosting our meetings. The next meeting is March 12, 2003. The meeting was adjourned at 1:10 p.m.